

Fill in this information to identify the case:

Debtor name State Theatre of Bay City/Bay County

United States Bankruptcy Court for the: EASTERN DISTRICT OF MICHIGAN

Case number (if known) 24-20261

Check if this is an amended filing

Official Form 202

Declaration Under Penalty of Perjury for Non-Individual Debtors

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- Schedule A/B: Assets–Real and Personal Property* (Official Form 206A/B)
- Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- Schedule H: Codebtors* (Official Form 206H)
- Summary of Assets and Liabilities for Non-Individuals* (Official Form 206Sum)
- Amended Schedule*
- Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- Other document that requires a declaration* _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 7, 2024

X /s/ Daniel Dimitroff

Signature of individual signing on behalf of debtor

Daniel Dimitroff

Printed name

Chairman of the Board

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

**Official Form 206Sum
Summary of Assets and Liabilities for Non-Individuals**

12/15

Part 1: Summary of Assets

1. Schedule A/B: Assets-Real and Personal Property (Official Form 206A/B)

1a. Real property:

Copy line 88 from *Schedule A/B*..... \$ **0.00**

1b. Total personal property:

Copy line 91A from *Schedule A/B*..... \$ **82,788.74**

1c. Total of all property:

Copy line 92 from *Schedule A/B*..... \$ **82,788.74**

Part 2: Summary of Liabilities

2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 206D)

Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*..... \$ **819,757.75**

3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 206E/F)

3a. Total claim amounts of priority unsecured claims:

Copy the total claims from Part 1 from line 5a of *Schedule E/F*..... \$ **34,636.70**

3b. Total amount of claims of nonpriority amount of unsecured claims:

Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*..... +\$ **764,010.76**

4. Total liabilities.....
Lines 2 + 3a + 3b

\$ **1,618,405.21**

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets - Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

No. Go to Part 2.

Yes Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

\$911.00

2. **Cash on hand**

3. **Checking, savings, money market, or financial brokerage accounts (Identify all)**

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. **Huntington Bank** **Checking** **4481** **\$4,429.02**

3.2. **Huntington Bank** **Savings** **6764** **\$1,395.71**

3.3. **PNC Bank** **Checking** **3538** **\$954.92**

3.4. **Frankenmuth Credit Union** **Savings** **9070** **\$28,724.09**

4. **Other cash equivalents (Identify all)**

5. **Total of Part 1.**

\$36,414.74

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

Part 2: Deposits and Prepayments

6. Does the debtor have any deposits or prepayments?

Debtor State Theatre of Bay City/Bay County
Name

Case number (*If known*) 24-20261

No. Go to Part 3.
 Yes Fill in the information below.

7. **Deposits, including security deposits and utility deposits**
Description, including name of holder of deposit

8. **Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent**
Description, including name of holder of prepayment

8.1. Michigan Millers Insurance - D&O insurance paid for February 2024 to February 2025 \$750.00

8.2. Michigan Millers Insurance - Property and liability insurance paid February 2024 to April 2024 \$1,974.00

9. **Total of Part 2.**

Add lines 7 through 8. Copy the total to line 81.

\$2,724.00

Part 3: Accounts receivable

10. **Does the debtor have any accounts receivable?**

No. Go to Part 4.
 Yes Fill in the information below.

Part 4: Investments

13. **Does the debtor own any investments?**

No. Go to Part 5.
 Yes Fill in the information below.

Part 5: Inventory, excluding agriculture assets

18. **Does the debtor own any inventory (excluding agriculture assets)?**

No. Go to Part 6.
 Yes Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
---------------------	-------------------------------------	---	---	------------------------------------

19. **Raw materials**

20. **Work in progress**

21. **Finished goods, including goods held for resale**
Concessions stock 11/1/2023 Unknown Liquidation \$650.00

22. **Other inventory or supplies**

23. **Total of Part 5.**
Add lines 19 through 22. Copy the total to line 84.

\$650.00

24. **Is any of the property listed in Part 5 perishable?**
 No
 Yes

Debtor State Theatre of Bay City/Bay County _____ Case number (If known) 24-20261 _____
Name _____

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

No
 Yes. Book value _____ Valuation method _____ Current Value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

No
 Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

No. Go to Part 7.

Yes Fill in the information below.

Part 7: Office furniture, fixtures, and equipment; and collectibles

38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?

No. Go to Part 8.

Yes Fill in the information below.

	General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39.	<u>Office furniture Chairs and desks</u>	<u>Unknown</u>	<u>Liquidation</u>	<u>\$1,000.00</u>
40.	<u>Office fixtures</u>			
41.	<u>Office equipment, including all computer equipment and communication systems equipment and software Computers, telecom and printers</u>	<u>Unknown</u>	<u>Liquidation</u>	<u>\$2,000.00</u>
42.	Collectibles Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles			

43. **Total of Part 7.**

Add lines 39 through 42. Copy the total to line 86.

\$3,000.00

44. Is a depreciation schedule available for any of the property listed in Part 7?

No
 Yes

45. Has any of the property listed in Part 7 been appraised by a professional within the last year?

No
 Yes

Part 8: Machinery, equipment, and vehicles

46. Does the debtor own or lease any machinery, equipment, or vehicles?

No. Go to Part 9.

Yes Fill in the information below.

	General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest

Debtor	State Theatre of Bay City/Bay County Name		Case number (<i>If known</i>)	24-20261															
47.	Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles																		
48.	Watercraft, trailers, motors, and related accessories <i>Examples:</i> Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels																		
48.1.	Trailer - 50% owner with Hell's Half Mile, located at Dry Dock	Unknown	Liquidation	\$10,000.00															
49.	Aircraft and accessories																		
50.	Other machinery, fixtures, and equipment (excluding farm machinery and equipment) Sound and light equipment, outdoor movie equipment \$30,000.00 Liquidation \$30,000.00																		
51.	Total of Part 8. \$40,000.00																		
Add lines 47 through 50. Copy the total to line 87.																			
52.	Is a depreciation schedule available for any of the property listed in Part 8?																		
	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes																	
53.	Has any of the property listed in Part 8 been appraised by a professional within the last year?																		
	<input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes																	
Part 9: Real property																			
54.	Does the debtor own or lease any real property?																		
	<input type="checkbox"/> No. Go to Part 10.	<input checked="" type="checkbox"/> Yes Fill in the information below.																	
55.	Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest																		
<table border="1"> <thead> <tr> <th>Description and location of property</th> <th>Nature and extent of debtor's interest in property</th> <th>Net book value of debtor's interest (Where available)</th> <th>Valuation method used for current value</th> <th>Current value of debtor's interest</th> </tr> </thead> <tbody> <tr> <td>Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.)</td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>55.1. Theatre located at 913 Washington Avenue, Bay City, Michigan</td> <td>Own</td> <td>\$1,164,695.16</td> <td>N/A</td> <td>Unknown</td> </tr> </tbody> </table>					Description and location of property	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest	Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.)					55.1. Theatre located at 913 Washington Avenue, Bay City, Michigan	Own	\$1,164,695.16	N/A	Unknown
Description and location of property	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest															
Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building, if available.)																			
55.1. Theatre located at 913 Washington Avenue, Bay City, Michigan	Own	\$1,164,695.16	N/A	Unknown															
56.	Total of Part 9. \$0.00																		
Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.																			
57.	Is a depreciation schedule available for any of the property listed in Part 9?																		
	<input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes																	

Debtor State Theatre of Bay City/Bay County
Name

Case number (*If known*) 24-20261

58. Has any of the property listed in Part 9 been appraised by a professional within the last year?

No
 Yes

Part 10: Intangibles and intellectual property

59. Does the debtor have any interests in intangibles or intellectual property?

No. Go to Part 11.

Yes Fill in the information below.

Part 11: All other assets

70. Does the debtor own any other assets that have not yet been reported on this form?

Include all interests in executory contracts and unexpired leases not previously reported on this form.

No. Go to Part 12.

Yes Fill in the information below.

**Current value of
debtor's interest**

71. **Notes receivable**

Description (include name of obligor)

72. **Tax refunds and unused net operating losses (NOLs)**

Description (for example, federal, state, local)

73. **Interests in insurance policies or annuities**

74. **Causes of action against third parties (whether or not a lawsuit
has been filed)**

Possible claim against former employee

Unknown

Nature of claim

Amount requested

\$0.00

75. **Other contingent and unliquidated claims or causes of action of
every nature, including counterclaims of the debtor and rights to
set off claims**

76. **Trusts, equitable or future interests in property**

77. **Other property of any kind not already listed** Examples: Season tickets,
country club membership

78. **Total of Part 11.**

Add lines 71 through 77. Copy the total to line 90.

\$0.00

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

No
 Yes

Part 12: **Summary**

In Part 12 copy all of the totals from the earlier parts of the form

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1</i>	<u>\$36,414.74</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$2,724.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$0.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u>\$0.00</u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>\$650.00</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u>\$0.00</u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>\$3,000.00</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>\$40,000.00</u>	
88. Real property. <i>Copy line 56, Part 9.....></i>		<u>\$0.00</u>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>\$0.00</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	<u>\$0.00</u>	
91. Total. Add lines 80 through 90 for each column	<u>\$82,788.74</u>	+ 91b. <u>\$0.00</u>
92. Total of all property on Schedule A/B. Add lines 91a+91b=92		<u>\$82,788.74</u>

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 206D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible.

1. Do any creditors have claims secured by debtor's property?

No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
 Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims

2. List in alphabetical order all creditors who have secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim.

2.1 **Bay County Growth Alliance**

Creditor's Name

**812 N. Water Street
Bay City, MI 48708**

Creditor's mailing address

bcgaccv@gmail.com

Creditor's email address, if known

Date debt was incurred

6/26/2020

Last 4 digits of account number

Do multiple creditors have an interest in the same property?

No

Yes. Specify each creditor, including this creditor and its relative priority.

Describe debtor's property that is subject to a lien

**Theatre located at 913 Washington Avenue,
Bay City, Michigan**

Column A	Column B
Amount of claim	Value of collateral that supports this claim
Do not deduct the value of collateral.	

\$662,514.31

Unknown

Describe the lien

Pledges from Donors

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

As of the petition filing date, the claim is:

Check all that apply

Contingent

Unliquidated

Disputed

2.2 **Small Business Administration**

Creditor's Name

**P.O. Box 3918
Portland, OR 97208**

Creditor's mailing address

Creditor's email address, if known

Date debt was incurred

06/30/2020

Last 4 digits of account number
7802

Describe debtor's property that is subject to a lien

**Theatre located at 913 Washington Avenue,
Bay City, Michigan**

\$157,243.44

Unknown

Describe the lien

Blanket Lien

Is the creditor an insider or related party?

No

Yes

Is anyone else liable on this claim?

No

Yes. Fill out Schedule H: Codebtors (Official Form 206H)

Name

Do multiple creditors have an interest in the same property? No Yes. Specify each creditor, including this creditor and its relative priority.**As of the petition filing date, the claim is:**

Check all that apply

 Contingent
 Unliquidated
 Disputed3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any. **\$819,757.75****Part 2: List Others to Be Notified for a Debt Already Listed in Part 1**

List in alphabetical order any others who must be notified for a debt already listed in Part 1. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for secured creditors.

If no others need to be notified for the debts listed in Part 1, do not fill out or submit this page. If additional pages are needed, copy this page.

Name and address

On which line in Part 1 did you enter the related creditor?

Last 4 digits of account number for this entity

Bay County Growth Alliance
721 Washington Avenue
Suite 309
Bay City, MI 48708Line 2.1**US Small Business Administration**
2 North Street
Suite 320
Birmingham, AL 35203Line 2.2

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.

Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

	Total claim	Priority amount
2.1 Priority creditor's name and mailing address Internal Revenue Service P.O. Box 742562 Cincinnati, OH 45280-2562	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$34,636.70 \$34,636.70
	<input type="checkbox"/> Contingent	
	<input type="checkbox"/> Unliquidated	
	<input type="checkbox"/> Disputed	
Date or dates debt was incurred 1/1/2023 - 10/31/2023	Basis for the claim: Taxes	
Last 4 digits of account number	Is the claim subject to offset?	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (8)	<input checked="" type="checkbox"/> No	
	<input type="checkbox"/> Yes	

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

	Amount of claim
3.1 Nonpriority creditor's name and mailing address A&B Plumbing 3183 Wheeler Road Bay City, MI 48706	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$100.00
Date(s) debt was incurred 9/13/2023	<input type="checkbox"/> Contingent
Last 4 digits of account number	<input type="checkbox"/> Unliquidated
	<input type="checkbox"/> Disputed
	Basis for the claim: Trade Debt
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.2 Nonpriority creditor's name and mailing address Alpha Media 1795 Tittabawassee Saginaw, MI 48604	As of the petition filing date, the claim is: <i>Check all that apply.</i> \$4,600.00
Date(s) debt was incurred 7/14/2023 - 8/16/2023	<input type="checkbox"/> Contingent
Last 4 digits of account number	<input type="checkbox"/> Unliquidated
	<input type="checkbox"/> Disputed
	Basis for the claim: Advertising
	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor	State Theatre of Bay City/Bay County Name	Case number (if known)	24-20261
3.3	Nonpriority creditor's name and mailing address Andrews Hooper Pavlik, PLC 1601 Marquette Street Suite 4 Bay City, MI 48706 Date(s) debt was incurred <u>11/16/2022 - 12/31/2023</u> Last 4 digits of account number <u>8168</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$17,998.00
3.4	Nonpriority creditor's name and mailing address ASCAP 21678 Network Place Chicago, IL 60673 Date(s) debt was incurred <u>12/19/2023</u> Last 4 digits of account number <u>8168</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,197.11
3.5	Nonpriority creditor's name and mailing address Audio Imaging Specialists 12183 Corvair Drive Sterling Heights, MI 48312 Date(s) debt was incurred <u>3/1/2024</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$870.00
3.6	Nonpriority creditor's name and mailing address Bay Arts and Culture Commission 901 N. Water Street Bay City, MI 48708 Date(s) debt was incurred <u>12/31/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,100.00
3.7	Nonpriority creditor's name and mailing address Bay City Treasurer 301 Washington Avenue Bay City, MI 48708 Date(s) debt was incurred <u>10/2023 - 01/2024</u> Last 4 digits of account number <u>0001</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities - Pavilion</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$4,889.25
3.8	Nonpriority creditor's name and mailing address Bay City Treasurer 301 Washington Avenue Bay City, MI 48708 Date(s) debt was incurred <u>12/2023 - 01/2024</u> Last 4 digits of account number <u>6004</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities - Theatre</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,724.20
3.9	Nonpriority creditor's name and mailing address Bay City Treasurer 301 Washington Avenue Bay City, MI 48708 Date(s) debt was incurred <u>05/19/2023 - 08/26/2023</u> Last 4 digits of account number <u>741</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Security services at concerts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,952.83

Debtor Name	State Theatre of Bay City/Bay County	Case number (if known)	24-20261	
3.10	Nonpriority creditor's name and mailing address Bay County Circuit Court 1230 Washington Avenue Case No. 2024-3075-CK Bay City, MI 48708 Date(s) debt was incurred <u>2023</u> Last 4 digits of account number <u>75CK</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Notice Purposes Only - Collection Lawsuit</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$0.00
3.11	Nonpriority creditor's name and mailing address Bay Landscaping, Inc. 1630 SE Boutell Road Essexville, MI 48732 Date(s) debt was incurred <u>10/11/2023</u> Last 4 digits of account number <u>e818</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Landscaping at Wenona Park</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$114,198.05
3.12	Nonpriority creditor's name and mailing address Booking House 4652 James Austin Drive Mississauga, ON L4Z 4H1 Date(s) debt was incurred <u>08/09/2023 - 09/06/2023</u> Last 4 digits of account number <u>_</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$9,625.00
3.13	Nonpriority creditor's name and mailing address Brian's House P.O. Box 1201 Bay City, MI 48706 Date(s) debt was incurred <u>10/27/2023</u> Last 4 digits of account number <u>_</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,540.00
3.14	Nonpriority creditor's name and mailing address Clements Electric Inc. 204 S. Dean Street Bay City, MI 48706 Date(s) debt was incurred <u>Summer 2023</u> Last 4 digits of account number <u>_</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input checked="" type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Electrical Work</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$171,350.00
3.15	Nonpriority creditor's name and mailing address Comfort Inn 501 Saginaw Street Bay City, MI 48708 Date(s) debt was incurred <u>08/20/2023 - 01/28/2024</u> Last 4 digits of account number <u>9615</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,383.06
3.16	Nonpriority creditor's name and mailing address Consumers Energy P.O. Box 740309 Cincinnati, OH 45274-0309 Date(s) debt was incurred <u>_</u> Last 4 digits of account number <u>_</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Utilities</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$1,738.74

Debtor	State Theatre of Bay City/Bay County Name	Case number (if known)	24-20261	
3.17	Nonpriority creditor's name and mailing address Cumulus Media 1740 Champagne Drive North Saginaw, MI 48604 Date(s) debt was incurred <u>07/08/2023 - 08/26/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Advertising Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,544.00
3.18	Nonpriority creditor's name and mailing address Dee Dee Wackman 14 Lilac Lane Scarborough, ME 04074 Date(s) debt was incurred <u>11/6/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,500.00
3.19	Nonpriority creditor's name and mailing address Doubletree One Wenonah Park Place Bay City, MI 48708 Date(s) debt was incurred <u>07/10/2023 - 08/28/2023</u> Last 4 digits of account number <u>S216</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$20,081.46
3.20	Nonpriority creditor's name and mailing address ETIX 909 Aviation Parkway Suite 900 Morrisville, NC 27560 Date(s) debt was incurred <u>06/30/2023 - 09/20/2023</u> Last 4 digits of account number <u>858</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$13,895.81
3.21	Nonpriority creditor's name and mailing address Exhibition Services 6907 Westside Saginaw Road Bay City, MI 48706 Date(s) debt was incurred <u>08/29/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$550.00
3.22	Nonpriority creditor's name and mailing address Great Lakes Coca-Cola P.O. Box 809082 Chicago, IL 60680 Date(s) debt was incurred <u>09/22/2023</u> Last 4 digits of account number <u> </u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$482.50
3.23	Nonpriority creditor's name and mailing address Hayes Specialties 1761 East Genesee Avenue Saginaw, MI 48601 Date(s) debt was incurred <u>07/01/2023 - 09/20/2023</u> Last 4 digits of account number <u>2642</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i>	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: Trade Debt Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	\$2,255.88

Debtor	State Theatre of Bay City/Bay County Name	Case number (if known)	24-20261
3.24	<p>Nonpriority creditor's name and mailing address Hell's Half Mile 1010 Adams Street Bay City, MI 48708</p> <p>Date(s) debt was incurred <u>9/27/2023</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,179.00
3.25	<p>Nonpriority creditor's name and mailing address Jedi Mind Trip 6251 Willowbrook Drive Saginaw, MI 48638</p> <p>Date(s) debt was incurred <u>08/14/2023 - 08/28/2023</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$13,035.00
3.26	<p>Nonpriority creditor's name and mailing address Jonnie-on-the-Spot 4963 Dixie Highway Saginaw, MI 48601</p> <p>Date(s) debt was incurred <u>07/10/2023</u></p> <p>Last 4 digits of account number <u>State Thea</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$1,580.00
3.27	<p>Nonpriority creditor's name and mailing address Lagunatic Music and Filmworks 456 Johnson Avenue #202 Brooklyn, NY 11237</p> <p>Date(s) debt was incurred <u>08/18/2023</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$65,500.00
3.28	<p>Nonpriority creditor's name and mailing address Lake State Security 660 West Center Road Essexville, MI 48732</p> <p>Date(s) debt was incurred <u>06/15/2023 - 08/04/2023</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Trade Debt</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$9,860.00
3.29	<p>Nonpriority creditor's name and mailing address Michael Bacigalupo 206 Sharpe Street Essexville, MI 48732</p> <p>Date(s) debt was incurred <u>8/16/23 - 8/25/23</u></p> <p>Last 4 digits of account number <u> </u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed</p> <p>Basis for the claim: <u> </u></p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$59,449.89
3.30	<p>Nonpriority creditor's name and mailing address PNC Bank P.O. Box 3479 Pittsburgh, PA 15230</p> <p>Date(s) debt was incurred <u>01/01/2023 - 10/31/2023</u></p> <p>Last 4 digits of account number <u>Cash Advance</u></p>	<p>As of the petition filing date, the claim is: <i>Check all that apply.</i></p> <p><input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed</p> <p>Basis for the claim: Cash Advance</p> <p>Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes</p>	\$8,474.89

Debtor	State Theatre of Bay City/Bay County	Case number (if known)	24-20261
Name			
3.31	Nonpriority creditor's name and mailing address PNC Bank P.O. Box 3479 Pittsburgh, PA 15230	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$17,812.94
	Date(s) debt was incurred <u>01/01/2023 - 10/31/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>539</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Line of credit</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.32	Nonpriority creditor's name and mailing address PNC Bank P.O. Box 3479 Pittsburgh, PA 15230	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$17,988.66
	Date(s) debt was incurred <u>01/01/2023 - 10/31/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>9035</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Credit card</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.33	Nonpriority creditor's name and mailing address Serenus Johnson 5178 Kasemeyer Road Bay City, MI 48706	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$3,051.81
	Date(s) debt was incurred <u>06/23/2023 and 09/14/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>Statetheat</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Trade Debt</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.34	Nonpriority creditor's name and mailing address Sign Image 8155 Gratiot Road Saginaw, MI 48609	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$858.00
	Date(s) debt was incurred <u>01/24/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u> </u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Trade Debt</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.35	Nonpriority creditor's name and mailing address Spectrum Business Charter Communications P.O. Box 94188 Palatine, IL 60094-4188	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$199.96
	Date(s) debt was incurred <u> </u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u> </u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Utilities</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.36	Nonpriority creditor's name and mailing address Springthorpe Brothers 14100 Dickens Street #1 Sherman Oaks, CA 91423	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$68,750.00
	Date(s) debt was incurred <u>08/26/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u>5798</u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Trade Debt</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	
3.37	Nonpriority creditor's name and mailing address Stage Call P.O. Box 5406 Saginaw, MI 48603	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$23,383.25
	Date(s) debt was incurred <u>07/06/2023 - 08/26/2023</u>	<input type="checkbox"/> Contingent	
	Last 4 digits of account number <u> </u>	<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
		Basis for the claim: <u>Trade Debt</u>	
		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Debtor	State Theatre of Bay City/Bay County Name	Case number (if known)	24-20261
3.38	Nonpriority creditor's name and mailing address State of Michigan Attorney General Charitable Trust Section P.O. Box 30214 Lansing, MI 48909-7714 Date(s) debt was incurred _____ Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$0.00
3.39	Nonpriority creditor's name and mailing address Studio 23 901 North Water Street Bay City, MI 48708 Date(s) debt was incurred <u>09/25/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$600.00
3.40	Nonpriority creditor's name and mailing address The Huntington National Bank P.O. Box 1558 EA1W37 Columbus, OH 43216 Date(s) debt was incurred _____ Last 4 digits of account number <u>6764</u>	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$12,131.40
3.41	Nonpriority creditor's name and mailing address The Key Shop 1804 W. Wackerly Street Midland, MI 48640 Date(s) debt was incurred <u>11/01/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$967.00
3.42	Nonpriority creditor's name and mailing address Treetop Products 222 State Street Batavia, IL 60510 Date(s) debt was incurred <u>09/20/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$5,427.12
3.43	Nonpriority creditor's name and mailing address West River Light and Sound 349 E. Wackerly Road Sanford, MI 48657 Date(s) debt was incurred <u>08/2023 - 09/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$25,015.00
3.44	Nonpriority creditor's name and mailing address William A. Kibbe and Associates 1475 S. Washington Avenue Saginaw, MI 48601 Date(s) debt was incurred <u>09/29/2023</u> Last 4 digits of account number _____	As of the petition filing date, the claim is: <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	\$4,550.95

Debtor	State Theatre of Bay City/Bay County	Case number (if known)	24-20261
Name			
3.45	Nonpriority creditor's name and mailing address WRSR 4511 Miller Road Flint, MI 48507	As of the petition filing date, the claim is: <i>Check all that apply.</i>	\$5,620.00
		<input type="checkbox"/> Contingent	
		<input type="checkbox"/> Unliquidated	
		<input type="checkbox"/> Disputed	
Date(s) debt was incurred 08/07/2023 - 08/26/2023		Basis for the claim: Advertising	
Last 4 digits of account number 1930		Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes	

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Michael J. Hackett, J.D. 11512 North Straits Hwy. Suite 200 Cheboygan, MI 49721	Line <u>3.43</u> <input type="checkbox"/> Not listed. Explain _____	—
4.2	State of Michigan Attorney General Charitable Trust Section 525 West Ottawa Street 3rd Floor Williams Building Lansing, MI 48933	Line <u>3.38</u> <input type="checkbox"/> Not listed. Explain _____	—
4.3	Sturtz & Sturtz 608 S. Michigan Avenue Saginaw, MI 48602-1526	Line <u>3.28</u> <input type="checkbox"/> Not listed. Explain _____	—

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

5a. Total claims from Part 1
5b. Total claims from Part 2

5c. Total of Parts 1 and 2
Lines 5a + 5b = 5c.

Total of claim amounts		
5a.	\$	34,636.70
5b.	+	764,010.76
5c.	\$	798,647.46

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 206G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, number the entries consecutively.

1. Does the debtor have any executory contracts or unexpired leases?

No. Check this box and file this form with the debtor's other schedules. There is nothing else to report on this form.

Yes. Fill in all of the information below even if the contacts of leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).

2. List all contracts and unexpired leases

State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease

2.1 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.2 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.3 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

2.4 State what the contract or lease is for and the nature of the debtor's interest

State the term remaining

List the contract number of any government contract

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 206H Schedule H: Your Codebtors

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.

1. Do you have any codebtors?

No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
 Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, **Schedules D-G**. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: **Codebtor**

Column 2: **Creditor**

Name

Mailing Address

Name

Check all schedules that apply:

2.1 **Hell's Half Mile**

**1010 Adams Street
Bay City, MI 48708**

**William A. Kibbe and
Associates**

D _____

E/F **3.44**

G _____

Fill in this information to identify the case:

Debtor name **State Theatre of Bay City/Bay County**

United States Bankruptcy Court for the: **EASTERN DISTRICT OF MICHIGAN**

Case number (if known) **24-20261**

Check if this is an amended filing

Official Form 207

Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy

04/22

The debtor must answer every question. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and case number (if known).

Part 1: Income

1. Gross revenue from business

None.

Identify the beginning and ending dates of the debtor's fiscal year, which may be a calendar year

Sources of revenue
Check all that apply

Gross revenue
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From **1/01/2024** to **Filing Date**

Operating a business

\$16,926.57

Other _____

For prior year:
From **1/01/2023** to **12/31/2023**

Operating a business

\$1,340,096.00

Other _____

For year before that:
From **1/01/2022** to **12/31/2022**

Operating a business

\$1,178,949.00

Other _____

2. Non-business revenue

Include revenue regardless of whether that revenue is taxable. *Non-business income* may include interest, dividends, money collected from lawsuits, and royalties. List each source and the gross revenue for each separately. Do not include revenue listed in line 1.

None.

Description of sources of revenue

Gross revenue from each source
(before deductions and exclusions)

From the beginning of the fiscal year to filing date:
From **1/01/2024** to **Filing Date**

Bay Area Community Foundation

\$31,054.00

For prior year:
From **1/01/2023** to **12/31/2023**

Bay Area Community Foundation

\$30,215.00

For year before that:
From **1/01/2022** to **12/31/2022**

Bay Area Community Foundation

\$29,412.00

Part 2: List Certain Transfers Made Before Filing for Bankruptcy

3. Certain payments or transfers to creditors within 90 days before filing this case

List payments or transfers--including expense reimbursements--to any creditor, other than regular employee compensation, within 90 days before filing this case unless the aggregate value of all property transferred to that creditor is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.)

None.

Creditor's Name and Address	Dates	Total amount of value	Reasons for payment or transfer Check all that apply
3.1. Kevin Cole 412 Stanton Street Bay City, MI 48708	12/20/2023	\$8,978.25	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____
3.2. Tru-Klean 405 LaSalle Street Bay City, MI 48706		\$395.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____
3.3. See attached		\$0.00	<input type="checkbox"/> Secured debt <input type="checkbox"/> Unsecured loan repayments <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Services <input type="checkbox"/> Other _____

4. Payments or other transfers of property made within 1 year before filing this case that benefited any insider

List payments or transfers, including expense reimbursements, made within 1 year before filing this case on debts owed to an insider or guaranteed or cosigned by an insider unless the aggregate value of all property transferred to or for the benefit of the insider is less than \$7,575. (This amount may be adjusted on 4/01/25 and every 3 years after that with respect to cases filed on or after the date of adjustment.) Do not include any payments listed in line 3. *Insiders* include officers, directors, and anyone in control of a corporate debtor and their relatives; general partners of a partnership debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(31).

None.

Insider's name and address Relationship to debtor	Dates	Total amount of value	Reasons for payment or transfer

5. Repossessions, foreclosures, and returns

List all property of the debtor that was obtained by a creditor within 1 year before filing this case, including property repossessed by a creditor, sold at a foreclosure sale, transferred by a deed in lieu of foreclosure, or returned to the seller. Do not include property listed in line 6.

None

Creditor's name and address	Describe of the Property	Date	Value of property
Audio Imaging Specialists	Projector leased month-to-month	3/1/2024	Unknown

6. Setoffs

List any creditor, including a bank or financial institution, that within 90 days before filing this case set off or otherwise took anything from an account of the debtor without permission or refused to make a payment at the debtor's direction from an account of the debtor because the debtor owed a debt.

None

Creditor's name and address	Description of the action creditor took	Date action was taken	Amount
-----------------------------	---	-----------------------	--------

Part 3: Legal Actions or Assignments**7. Legal actions, administrative proceedings, court actions, executions, attachments, or governmental audits**

List the legal actions, proceedings, investigations, arbitrations, mediations, and audits by federal or state agencies in which the debtor was involved in any capacity—within 1 year before filing this case.

 None.

Case title Case number	Nature of case	Court or agency's name and address	Status of case
7.1. Plaintiff, The Springthorpe Brothers Corp. vs. Defendants, State Theatre of Bay City/Bay County and Michael Bacigalupo 2024-3075-cK	Collection	Bay County Circuit Court 1230 Washington Avenue Bay City, MI 48708	<input checked="" type="checkbox"/> Pending <input type="checkbox"/> On appeal <input type="checkbox"/> Concluded

8. Assignments and receivership

List any property in the hands of an assignee for the benefit of creditors during the 120 days before filing this case and any property in the hands of a receiver, custodian, or other court-appointed officer within 1 year before filing this case.

 None**Part 4: Certain Gifts and Charitable Contributions****9. List all gifts or charitable contributions the debtor gave to a recipient within 2 years before filing this case unless the aggregate value of the gifts to that recipient is less than \$1,000** None

Recipient's name and address	Description of the gifts or contributions	Dates given	Value
------------------------------	---	-------------	-------

Part 5: Certain Losses**10. All losses from fire, theft, or other casualty within 1 year before filing this case.** None

Description of the property lost and how the loss occurred	Amount of payments received for the loss	Dates of loss	Value of property lost
	If you have received payments to cover the loss, for example, from insurance, government compensation, or tort liability, list the total received. List unpaid claims on Official Form 106A/B (Schedule A/B: Assets – Real and Personal Property).		

Part 6: Certain Payments or Transfers**11. Payments related to bankruptcy**

List any payments of money or other transfers of property made by the debtor or person acting on behalf of the debtor within 1 year before the filing of this case to another person or entity, including attorneys, that the debtor consulted about debt consolidation or restructuring, seeking bankruptcy relief, or filing a bankruptcy case.

 None.

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
---	---	-------	-----------------------

Who was paid or who received the transfer? Address	If not money, describe any property transferred	Dates	Total amount or value
11.1. Warner Norcross & Judd, LLP 715 E. Main Street Suite 110 Midland, MI 48640-5382	Attorney Fees	2/29/2024 - \$5,500 retainer 2/29/2024 - \$3,500 pre-petition	\$9,000.00
Email or website address rgiunta@wnj.com			
Who made the payment, if not debtor?			

12. Self-settled trusts of which the debtor is a beneficiary

List any payments or transfers of property made by the debtor or a person acting on behalf of the debtor within 10 years before the filing of this case to a self-settled trust or similar device.

Do not include transfers already listed on this statement.

None.

Name of trust or device	Describe any property transferred	Dates transfers were made	Total amount or value
-------------------------	-----------------------------------	---------------------------	-----------------------

13. Transfers not already listed on this statement

List any transfers of money or other property by sale, trade, or any other means made by the debtor or a person acting on behalf of the debtor within 2 years before the filing of this case to another person, other than property transferred in the ordinary course of business or financial affairs. Include both outright transfers and transfers made as security. Do not include gifts or transfers previously listed on this statement.

None.

Who received transfer? Address	Description of property transferred or payments received or debts paid in exchange	Date transfer was made	Total amount or value
-----------------------------------	--	------------------------	-----------------------

Part 7: Previous Locations**14. Previous addresses**

List all previous addresses used by the debtor within 3 years before filing this case and the dates the addresses were used.

Does not apply

Address	Dates of occupancy From-To
---------	-------------------------------

Part 8: Health Care Bankruptcies**15. Health Care bankruptcies**

Is the debtor primarily engaged in offering services and facilities for:

- diagnosing or treating injury, deformity, or disease, or
- providing any surgical, psychiatric, drug treatment, or obstetric care?

No. Go to Part 9.

Yes. Fill in the information below.

Facility name and address	Nature of the business operation, including type of services the debtor provides	If debtor provides meals and housing, number of patients in debtor's care
---------------------------	--	---

Part 9: Personally Identifiable Information

16. Does the debtor collect and retain personally identifiable information of customers?

No.
 Yes. State the nature of the information collected and retained.

17. Within 6 years before filing this case, have any employees of the debtor been participants in any ERISA, 401(k), 403(b), or other pension or profit-sharing plan made available by the debtor as an employee benefit?

No. Go to Part 10.
 Yes. Does the debtor serve as plan administrator?

Part 10: Certain Financial Accounts, Safe Deposit Boxes, and Storage Units**18. Closed financial accounts**

Within 1 year before filing this case, were any financial accounts or instruments held in the debtor's name, or for the debtor's benefit, closed, sold, moved, or transferred?

Include checking, savings, money market, or other financial accounts; certificates of deposit; and shares in banks, credit unions, brokerage houses, cooperatives, associations, and other financial institutions.

None

Financial Institution name and Address	Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
18.1. PNC Bank 1111 N. Euclid Avenue Bay City, MI 48706	XXXX-8617	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	11/16/2023	\$3,100.00
18.2. Huntington Bank 3533 Wilder Road Bay City, MI 48706	XXXX-6930	<input type="checkbox"/> Checking <input type="checkbox"/> Savings <input checked="" type="checkbox"/> Money Market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	11/16/2023	\$14,395.71

19. Safe deposit boxes

List any safe deposit box or other depository for securities, cash, or other valuables the debtor now has or did have within 1 year before filing this case.

None

Depository institution name and address	Names of anyone with access to it Address	Description of the contents	Does debtor still have it?
---	--	-----------------------------	----------------------------

20. Off-premises storage

List any property kept in storage units or warehouses within 1 year before filing this case. Do not include facilities that are in a part of a building in which the debtor does business.

None

Facility name and address	Names of anyone with access to it	Description of the contents	Does debtor still have it?
Wenonah Park 111 Center Avenue Bay City, MI 48708	City of Bay City, Tim Botzau	Outdoor movie equipment	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Part 11: Property the Debtor Holds or Controls That the Debtor Does Not Own**21. Property held for another**

List any property that the debtor holds or controls that another entity owns. Include any property borrowed from, being stored for, or held in trust. Do not list leased or rented property.

None

Owner's name and address	Location of the property	Describe the property	Value
Bay Area Community Foundation Pere Marquette Depot 1000 Adams Street Site 200 Bay City, MI 48708		State Theatre Agency Fund - STAA State Theatre Bay City/Bay County Endowment Fund - STAE Wenonah Park Maintenance and Operations Agency Fund - WENA Wenonah Park Maintenance and Operations Designated Fund - WEND	\$741,952.56

Part 12: Details About Environment Information

For the purpose of Part 12, the following definitions apply:

Environmental law means any statute or governmental regulation that concerns pollution, contamination, or hazardous material, regardless of the medium affected (air, land, water, or any other medium).

Site means any location, facility, or property, including disposal sites, that the debtor now owns, operates, or utilizes or that the debtor formerly owned, operated, or utilized.

Hazardous material means anything that an environmental law defines as hazardous or toxic, or describes as a pollutant, contaminant, or a similarly harmful substance.

Report all notices, releases, and proceedings known, regardless of when they occurred.

22. Has the debtor been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.

No.
 Yes. Provide details below.

Case title Case number	Court or agency name and address	Nature of the case	Status of case

23. Has any governmental unit otherwise notified the debtor that the debtor may be liable or potentially liable under or in violation of an environmental law?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

24. Has the debtor notified any governmental unit of any release of hazardous material?

No.
 Yes. Provide details below.

Site name and address	Governmental unit name and address	Environmental law, if known	Date of notice

Part 13: Details About the Debtor's Business or Connections to Any Business**25. Other businesses in which the debtor has or has had an interest**

List any business for which the debtor was an owner, partner, member, or otherwise a person in control within 6 years before filing this case. Include this information even if already listed in the Schedules.

None**Business name address****Describe the nature of the business****Employer Identification number**

Do not include Social Security number or ITIN.

Dates business existed**26. Books, records, and financial statements**

26a. List all accountants and bookkeepers who maintained the debtor's books and records within 2 years before filing this case.

 None**Name and address****Date of service
From-To****2011 to October
2023****26a.1. Michael Bacigalupo
206 Sharpe Street
Essexville, MI 48732****26a.2. Tracy Teich
2275 Carroll Road
Bay City, MI 48708****November 2023 to
February 2024****26a.3. Andrews Hooper Pavlik PLC
1601 Marquette Street
Suite 4
Bay City, MI 48706****2010 to February
2024**

26b. List all firms or individuals who have audited, compiled, or reviewed debtor's books of account and records or prepared a financial statement within 2 years before filing this case.

 None**Name and address****Date of service
From-To****2010 to 2023****26b.1. Andrews Hooper Pavlik PLC
1601 Marquette Street
Suite 4
Bay City, MI 48706**

26c. List all firms or individuals who were in possession of the debtor's books of account and records when this case is filed.

 None**Name and address****If any books of account and records are
unavailable, explain why****26c.1. Andrews Hooper Pavlik PLC
1601 Marquette Street
Suite 4
Bay City, MI 48706****Missing records; 990 and financial
statements could not be completed**

26d. List all financial institutions, creditors, and other parties, including mercantile and trade agencies, to whom the debtor issued a financial statement within 2 years before filing this case.

 None**Name and address****27. Inventories**

Have any inventories of the debtor's property been taken within 2 years before filing this case?

 No Yes. Give the details about the two most recent inventories.

Name of the person who supervised the taking of the inventory	Date of inventory	The dollar amount and basis (cost, market, or other basis) of each inventory
---	-------------------	--

28. List the debtor's officers, directors, managing members, general partners, members in control, controlling shareholders, or other people in control of the debtor at the time of the filing of this case.

Name	Address	Position and nature of any interest	% of interest, if any
Daniel Dimitroff	3865-7 Wilder Road Bay City, MI 48706	Board Chair	0%
Tera Szeliga	P.O. Box 1416 Bay City, MI 48706	Secretary	0%
Stephanie Martinez	800 N. Euclid Avenue Bay City, MI 48706	Treasurer	0%
Jack Kidwell	1004 N. Michigan Saginaw, MI 48602	Member	0%
Jeff Staudacher	104 Jennison Place Bay City, MI 48708	Member	0%
Kendra Christensen	P.O. Box 1416 Bay City, MI 48706	Member	0%
Tracy Teich	2275 Carroll Road Bay City, MI 48708	Interim Bookkeeper	0%

29. Within 1 year before the filing of this case, did the debtor have officers, directors, managing members, general partners, members in control of the debtor, or shareholders in control of the debtor who no longer hold these positions?

No
 Yes. Identify below.

Name	Address	Position and nature of any interest	Period during which position or interest was held
Mark Delestowicz	2453 DeWyse Bay City, MI 48708	Former Board Chair	2000 to 2022

30. Payments, distributions, or withdrawals credited or given to insiders

Within 1 year before filing this case, did the debtor provide an insider with value in any form, including salary, other compensation, draws, bonuses, loans, credits on loans, stock redemptions, and options exercised?

No
 Yes. Identify below.

Name and address of recipient	Amount of money or description and value of property	Dates	Reason for providing the value
-------------------------------	--	-------	--------------------------------

31. Within 6 years before filing this case, has the debtor been a member of any consolidated group for tax purposes?

No
 Yes. Identify below.

Name of the parent corporation

Employer Identification number of the parent corporation

32. Within 6 years before filing this case, has the debtor as an employer been responsible for contributing to a pension fund?

No
 Yes. Identify below.

Name of the pension fund

Employer Identification number of the pension fund

Part 14: Signature and Declaration

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both.
18 U.S.C. §§ 152, 1341, 1519, and 3571.

I have examined the information in this *Statement of Financial Affairs* and any attachments and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on March 7, 2024

/s/ Daniel Dimitroff

Signature of individual signing on behalf of the debtor

Daniel Dimitroff

Printed name

Position or relationship to debtor

Chairman of the Board

Are additional pages to *Statement of Financial Affairs for Non-Individuals Filing for Bankruptcy* (Official Form 207) attached?

No
 Yes

STATEMENT OF FINANCIAL AFFAIRS - QUESTION 3.3

State Theatre

3/1/2024 10:11 AM

Register: Programming Check Book

From 11/01/2023 through 03/01/2024

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
11/02/2023			-split-	Deposit		X	\$130.00	\$,491.33
11/02/2023			-split-	Deposit		X	1,516.00	7,007.33
11/08/2023	11863	Steve Lind	500 Event Expenses:560 Presen...		800.00	X		6,207.33
11/08/2023	11864	Kate Brindle	500 Event Expenses:560 Presen...		800.00	X		5,407.33
11/08/2023	11865	Norm Stulz	500 Event Expenses:560 Presen...		1,000.00	X		4,407.33
11/08/2023	11866	Kaleb Whisman	-split-		728.73	X		3,678.60
11/08/2023	11867	Gordons Food Service	600 Non Personnel Expenses:62...	Tax ID#38-3562110	67.41	X		3,611.19
11/08/2023	11868	United Wholesale Group	600 Non Personnel Expenses:62...	Tax ID#38-3562110	629.79	X		2,981.40
11/08/2023	11869	Paul E Phillips	-split-		1,241.36	X		1,740.04
11/09/2023			-split-	Deposit		X	1,697.00	3,437.04
11/14/2023			-split-	Deposit		X	4,400.00	7,837.04
11/15/2023			-split-	Deposit		X	1,210.00	9,047.04
11/22/2023			-split-	Deposit		X	2,119.19	11,166.23
11/22/2023	11870	Kaleb Whisman	-split-		728.73	X		10,437.50
11/22/2023	11871	Paul E Phillips	-split-		1,241.36	X		9,196.14
11/22/2023	11872	Spectrum Business	-split-	Account Number 824...	408.84	X		8,787.30
11/22/2023	11873	Hayes Specialties Corp.	600 Non Personnel Expenses:62...	Account #4852642	309.20	X		8,478.10
11/22/2023	11874	Consumers Energy	600 Non Personnel Expenses:73...	Acct# 1000 2273 4659	107.58	X		8,370.52
11/22/2023	11875	Michigan Millers Insurance	-split-	CL0025490P	3,849.00	X		4,521.52
11/22/2023	11876	Swank Motion Pictures	500 Event Expenses:530 Film R...	Customer Number 02...	1,400.00	X		3,121.52
11/27/2023	EFT	Huntington Bank	600 Non Personnel Expenses:61...		1,000.00	X		2,121.52
11/29/2023			-split-	Deposit		X	2,104.50	4,226.02
11/30/2023			Bank Service Charges	Service Charge	20.00	X		4,206.02
12/03/2023	11877	Kent Aloia	-split-	November 2023	138.70	X		4,067.32
12/03/2023	11878	Chris Skowronski	500 Event Expenses:545 Net Pa...	November 2023	96.78	X		3,970.54
12/03/2023	11879	Audio Imaging Specialists	-split-	Projector Maintenance...	2,785.90	X		1,184.64
12/03/2023	11880	West Michigan Piano, LLC	500 Event Expenses:515 Equip...	Customer ID: State T	1,800.00	X		-615.36

State Theatre

3/1/2024 10:11 AM

Register: Programming Check Book

From 11/01/2023 through 03/01/2024

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
12/03/2023	11881	Consumers Energy	600 Non Personnel Expenses:73...	Acct# 1000 2273 4659	579.18	X		-1,194.54
12/03/2023	11882	Small Business Administration	500 Event Expenses:560 Presen...	#9368797802	1,923.00	X		-3,117.54
12/04/2023	11883	Bay Area Women's Center	500 Event Expenses:570 Renter...	White Christmas fund...	785.00	X		-3,902.54
12/04/2023	11884	Paul E Phillips	-split-	Dec 8,2023	1,241.36	X		-5,143.90
12/04/2023	11885	Kaleb Whisman	-split-		655.58	X		-5,799.48
12/04/2023	11886	AT&T U-verse	-split-	Account #287329175...	186.20	X		-5,985.68
12/06/2023			-split-	Deposit		X	2,914.50	-3,071.18
12/06/2023			Holding Account-Money Market	Funds Transfer		X	8,000.00	4,928.82
12/07/2023	11887	Rose Pest Solutions	600 Non Personnel Expenses:67...	Client# 80004305	509.00	X		4,419.82
12/07/2023	11888	Hayes Specialties Corp.	600 Non Personnel Expenses:62...	Account #4852642	259.45	X		4,160.37
12/07/2023	11889	Gordons Food Service	600 Non Personnel Expenses:62...	Tax ID#38-3562110	551.07	X		3,609.30
12/07/2023	11890	Summit Printing	500 Event Expenses:565 Printin...		178.00	X		3,431.30
12/11/2023	11891	Bissonnette Productions LLC	500 Event Expenses:545 Net Pa...	inv#100	500.00	X		2,931.30
12/11/2023	11892	Jay Burk	500 Event Expenses:565 Printin...		63.60	X		2,867.70
12/11/2023	11893	ETIX	600 Non Personnel Expenses:63...	STBC103123	741.62	X		2,126.08
12/11/2023	11894	Paul Phillips	600 Non Personnel Expenses:72...		1,043.74	X		1,082.34
12/11/2023	11895	Matt Ferranti LLC	-split-		2,793.21	X		-1,710.87
12/11/2023	11896	Bay Chorale	-split-	Christmas concert	3,337.55	X		-5,048.42
12/13/2023			-split-	Deposit		X	4,364.00	-684.42
12/15/2023	11897	Denis Ikeeler	600 Non Personnel Expenses:69...	Piano Tuning 6/27/20...	160.00	X		-844.42
12/15/2023	11898	United Wholesale Group	600 Non Personnel Expenses:62...	Tax ID#38-3562110	53.80	X		-898.22
12/15/2023	11899	Matt Ferranti LLC	-split-	VOID: bar		X		-898.22
12/15/2023	11900	Kiwanis Club	-split-	Warren Miller 2023	1,384.25	X		-2,282.47
12/18/2023			-split-	Deposit		X	2,622.50	340.03
12/20/2023			Grants	Deposit		X	25,000.00	25,340.03
12/20/2023	11901	Kent Aloia	-split-	December 2023	255.42	X		25,084.61
12/20/2023	11902	Jared Julien	600 Non Personnel Expenses:64...	December 2023	674.64	X		24,409.97

State Theatre

3/1/2024 10:11 AM

Register: Programming Check Book

From 11/01/2023 through 03/01/2024

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
12/20/2023	11903	Paul E Phillips	-split-	Dec 22,2023	1,241.36	X		23,168.61
12/20/2023	11904	Kaleb Whisman	-split-		1,099.65	X		22,068.96
12/20/2023	11905	Kevin Cole	-split-	"Cole In Your Stocki...	8,978.25	X		13,090.71
12/20/2023	11906	Mike Bacigalupo	-split-		1,364.32	X		11,726.39
12/20/2023	11907	Bay City Noon Optimist Club	600 Non Personnel Expenses:60...	travelogue tickets	195.00	X		11,531.39
12/20/2023	11908	Allan Robetoy	100 Events Income:135 Ticket L...	refund for cancelled s...	40.00	X		11,491.39
12/20/2023	11909	State of Michigan/MLCC	500 Event Expenses:535 Licens...	Special Liquor Licens...	50.00	X		11,441.39
12/21/2023	EFT	Huntington Bank	600 Non Personnel Expenses:61...		500.00	X		10,941.39
12/21/2023	11910	Leaders for Christ	500 Event Expenses:570 Renter...		962.00	X		9,979.39
12/21/2023	11911	Kiwanis Club	500 Event Expenses:570 Renter...	Warren Miller 2023 a...	180.75	X		9,798.64
12/29/2023			-split-	Deposit		X	6,020.00	15,818.64
01/03/2024			-split-	Deposit		X	3,253.75	19,072.39
01/04/2024	11925	Unclaimed Freight Ace Hard...	600 Non Personnel Expenses:72...	Account #: 290.002630	163.33	X		18,909.06
01/04/2024	11926	Hayes Specialties Corp.	600 Non Personnel Expenses:62...	Account #4852642	500.00	X		18,409.06
01/04/2024	11927	Solucient Security Systems	600 Non Personnel Expenses:70...		437.40	X		17,971.66
01/04/2024	11928	Solucient Security Systems	600 Non Personnel Expenses:70...		155.00	X		17,816.66
01/04/2024	11929	Audio Central Alarm, Inc.	600 Non Personnel Expenses:70...	Account WORL0020...	360.00	X		17,456.66
01/04/2024	11930	AT&T	600 Non Personnel Expenses:73...		186.20	X		17,270.46
01/04/2024	11931	Bay City Treasurer	-split-		2,500.00	X		14,770.46
01/04/2024	11932	Andrews Hooper Pavlik Pl.C	600 Non Personnel Expenses:60...	Customer ID: STATE	2,500.00	X		12,270.46
01/04/2024	11933	ETIX	600 Non Personnel Expenses:63...	STBC103123	762.46	X		11,508.00
01/04/2024	11934	Consumers Energy	600 Non Personnel Expenses:73...	Acct# 1000 2273 4659	1,093.12	X		10,414.88
01/04/2024	11935	Michigan Millers Insurance	-split-	CL0025490P	15.00	X		10,399.88
01/04/2024	11936	Paul E Phillips	-split-	Jan 5, 2024	1,241.36	X		9,158.52
01/04/2024	11937	Kaleb Whisman	-split-	JAN 5, 2024	415.21	X		8,743.31
01/04/2024	11938	Arnold Sales	-split-		510.78	X		8,232.53
01/04/2024	11939	Spectrum Business	-split-	Account Number 824...	199.99	X		8,032.54

State Theatre

3/1/2024 10:11 AM

Register: Programming Check Book

From 11/01/2023 through 03/01/2024

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
01/05/2024	11940	Mike Ball	-split-	VOID: 12/31/2023		X		8,032.54
01/05/2024	11941	Mike Ball	-split-	12/31/2023	5,075.00	X		2,957.54
01/11/2024	11942	ETIX	600 Non Personnel Expenses:63...	STBC103123	1,243.55	X		1,713.99
01/11/2024	11943	Gordons Food Service	600 Non Personnel Expenses:62...	Tax ID#38-3562110	630.16	X		1,083.83
01/11/2024	11944	Hayes Specialties Corp.	600 Non Personnel Expenses:62...	Account #4852642	245.45	X		838.38
01/11/2024	11945	United Wholesale Group	600 Non Personnel Expenses:62...	Tax ID#38-3562110	200.20	X		638.18
01/16/2024	EFT	Internal Revenue Service	800 Personnel Expenses:810 Pa...		2,263.94	X		-1,625.76
01/16/2024			Holding Account-Money Market	Funds Transfer		X	5,000.00	3,374.24
01/17/2024			-split-	Deposit		X	430.35	3,804.59
01/19/2024	EFT	Huntington Bank	600 Non Personnel Expenses:61...		243.00	X		3,561.59
01/19/2024	EFT	Michigan Department of Trea...	-split-		997.39	X		2,564.20
01/20/2024	11946	Kaleb Whisman	-split-	JAN 19, 2024	801.22			1,762.98
01/20/2024	11947	Joe Christensen	500 Event Expenses:545 Net Pa...		200.00	X		1,562.98
01/20/2024	11948	Jeff Poirer	500 Event Expenses:560 Presen...	Band Roulette 2024	50.00	X		1,512.98
01/22/2024	EFT	Internal Revenue Service	800 Personnel Expenses:810 Pa...		1,762.64	X		-249.66
01/22/2024	EFT	PNC Bank	500 Event Expenses:560 Presen...		0.67	X		-250.33
01/22/2024			Cash - PNC Money Market	Funds Transfer		X	0.67	-249.66
01/24/2024			-split-	Deposit		X	37,471.00	37,221.34
01/26/2024	11949	Rob Little	500 Event Expenses:560 Presen...	1/27/2024	5,000.00	X		32,221.34
01/26/2024	11950	Vikram Balaji	500 Event Expenses:560 Presen...	1/27/24	500.00			31,721.34
01/26/2024	11951	Rob Little	500 Event Expenses:560 Presen...	1/27/2024 bonus for ...	2,000.00	X		29,721.34
01/29/2024	EFT	Unemployment Insurance Ag...	800 Personnel Expenses:810 Pa...	UIA Accnt. #144913...	73.67	X		29,647.67
01/29/2024	11952	Paul Phillips	600 Non Personnel Expenses:62...		125.00			29,522.67
01/29/2024	11953	Consumers Energy	600 Non Personnel Expenses:73...	Acct# 1000 2273 4659	1,994.49			27,528.18
01/29/2024	11954	Coca Cola	-split-		418.46			27,109.72
01/29/2024	11955	Jared Julien	500 Event Expenses:545 Net Pa...	jan and feb 2024	720.00			26,389.72
01/29/2024	11956	Grainger	600 Non Personnel Expenses:72...	Acct# 863417663	243.09			26,146.63

State Theatre

3/1/2024 10:11 AM

Register: Programming Check Book

From 11/01/2023 through 03/01/2024

Sorted by: Date, Type, Number/Ref

Date	Number	Payee	Account	Memo	Payment	C	Deposit	Balance
01/29/2024	11957	Jeff Staudacher	500 Event Expenses:541 Liquor...		705.46	X		25,441.17
01/29/2024	11958	Audio Imaging Specialists	600 Non Personnel Expenses:69...	Projector rental Jan a...	4,000.00			21,441.17
01/29/2024	11959	SpotLinks, LLC	600 Non Personnel Expenses:60...	Weekly Email Campa...	150.00			21,291.17
01/29/2024	11960	Andrews Hooper Pavlik PLC	600 Non Personnel Expenses:60...	Customer ID: STATE	682.00			20,609.17
01/29/2024	11961	Rose Pest Solutions	600 Non Personnel Expenses:67...	VOID: Client# 80004...		X		20,609.17
01/29/2024	11962	Rose Pest Solutions	600 Non Personnel Expenses:67...	Client# 80004305	173.00			20,436.17
01/29/2024	11963	AT&T	600 Non Personnel Expenses:73...	VOID:		X		20,436.17
01/29/2024	11964	Spectrum Business	-split-	Account Number 824...	199.96			20,236.21
01/29/2024	11965	Arnold Sales	600 Non Personnel Expenses:72...	inv#1413730	92.21			20,144.00
01/29/2024	11966	Bay City Treasurer	-split-		4,071.21			16,072.79
01/29/2024	11967	Bay City Treasurer	-split-	VOID:		X		16,072.79
01/29/2024	11968	Bay City Noon Optimist Club	600 Non Personnel Expenses:60...	advertising	125.00			15,947.79
01/31/2024			-split-	Deposit		X	2,554.70	18,502.49
02/01/2024			200 Other Income:265 Miscella...	Deposit			188.77	18,691.26
02/07/2024			-split-	Deposit			2,536.00	21,227.26
02/08/2024	11974	Major Chords for Minors	500 Event Expenses:570 Renter...	Band Roulette 2024	3,823.50			17,403.76
02/08/2024	11975	D-Street Entertainment	500 Event Expenses:570 Renter...	Band Roulette 2024	3,823.50			13,580.26
02/09/2024	11976	Bay Arts and Culture Commi...	500 Event Expenses:570 Renter...		6,043.00			7,537.26
02/09/2024	11977	Michigan Millers Insurance	-split-	CL0025490P	750.00			6,787.26
02/09/2024	11978	Michigan Millers Insurance	-split-	CL0025490P	1,974.00			4,813.26
02/14/2024			-split-	Deposit			714.00	5,527.26
02/16/2024	EFT	State of Michigan - Dept of T...	-split-		2,616.24			2,911.02
02/21/2024			-split-	Deposit			518.00	3,429.02
02/23/2024			Cash - PNC Money Market	Funds Transfer			5,000.00	8,429.02
02/26/2024			Cash - PNC Money Market	Funds Transfer			5,000.00	13,429.02
02/29/2024		Warren Norcross and Judd LLP	600 Non Personnel Expenses:67...	Legal fees	9,000.00			4,429.02

United States Bankruptcy Court
Eastern District of Michigan

In re State Theatre of Bay City/Bay County _____ Case No. 24-20261
Debtor(s) Chapter 7 _____

STATEMENT OF ATTORNEY FOR DEBTOR(S)
PURSUANT TO F.R.BANKR.P. 2016(b)

The undersigned, pursuant to F.R.Bankr.P. 2016(b), states that:

1. The undersigned is the attorney for the Debtor(s) in this case.
2. The compensation paid or agreed to be paid by the Debtor(s) to the undersigned is: [Check one]
[] **FLAT FEE**
A. For legal services rendered in contemplation of and in connection with this case, exclusive of the filing fee paid 5,500.00
B. Prior to filing this statement, received 5,500.00
C. The unpaid balance due and payable is 0.00
[] **RETAINER**
A. Amount of retainer received _____
B. The undersigned shall bill against the retainer at an hourly rate of \$ _____. [Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.
3. \$ 338.00 of the filing fee has been paid.
4. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: [Cross out any that do not apply.]
A. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
B. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;
C. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;
D. ~~Representation of the debtor in adversary proceedings and other contested bankruptcy matters;~~
E. Reaffirmations;
F. Redemptions;
G. Other:
5. By agreement with the debtor(s), the above-disclosed fee does not include the following services:
Representation of the debtors in any dischargeability actions or any other adversary proceeding.
6. The source of payments to the undersigned was from:
A. XX Debtor(s)' earnings, wages, compensation for services performed
B. _____ Other (describe, including the identity of payor) _____
7. The undersigned has not shared or agreed to share, with any other person, other than with members of the undersigned's law firm or corporation, any compensation paid or to be paid except as follows:

Dated: March 7, 2024

/s/ Rozanne M. Giunta

Attorney for the Debtor(s)

Rozanne M. Giunta

Warner Norcross & Judd, LLP

715 E. Main Street

Suite 110

Midland, MI 48640-5382

989-698-3758

rgiunta@wnj.com

P29969 MI

Agreed: /s/ Daniel Dimitroff
Daniel Dimitroff
Debtor

Debtor